SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

> BAYFIELD COUNTY, WISCOMSIN Date S APPLICATION FOR PERMIT ក្សាp (Received)

JUN 12 2013

Bayfield Co. Zoning Dept.

Date: Refund: Permit #: Amount Paid: 6-10-13 るとが 6-14-13 303

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. TYPE OF PERMIT REQUESTED→ X LAND USE 2 2 0 2 0 Owner's Name: Contractor: Address of Property: Authorized Kimbesty 2 PROJECT LOCATION Ser RAH 1/4, 2 Legal Description: (Use Tax Statement) MALLIN 1/4 tion on behalf of Owner(s)) Lot(s) SANITARY [] F 21990 PIN: (23 digits)
04-1021-2-45-06-21-101-006-GRAND Agent Phone: Contractor Phone: City/State/Zip: Vol & Page V. 675 P. 158 PRIVY Vie E PrAtt HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp) ☐ CONDITIONAL USE City/State/Zip Plumber: d) Agent Mailing Address (include City/State/Zip): -4 BH Lot(s) No. GrAND View, 54839 60000 Block(s) No. □ SPECIAL USE Recorded Document: (i.e. Property Own Volume_ Subdivision: 17 S. **1839** B.O.A Telephone 715-163 Cell Phone: Plumber Phone: Written Authorization e. Property Ownership)

Page(s) 158OTHER 32

Proposed Construction:	Existing Structure					-	2000	· .		Value at Time of Completion * include donated time & material	□ Non-Shoreland	X Shoreland —	
rction:	Existing Structure: (If permit being applied for is relevant to it)			Property	☐ Run a Business on -	□ Relocate (existing bldg)	☐ Conversion	K Addition/Alteration	☐ New Construction	Project (What are you applying for)		☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	X.ls Property/Land within 300 feet of River, Stream (ind. Intermittent) Creek or Landward side of Floodplain? If yescontinue
	or is relevant to it)			□ Foundation	☐ No Basement	☐ Basement	□ 2-Story	∃ 1-Story + Loft	X 1-Story	# of Stories and/or basement		n 1000 feet of Lake, Pond If ye	n 300 feet of River, Strea of Floodplain? If ye
Length: 36	Length:							X Year Round	☐ Seasonal	Use		Pond or Flowage If yescontinue	
					□ None		¥ 3	□ 2	□ 1	# of bedrooms		Distance Stru	Distance Stru
Width: 16	Width:	animit sopration	□ None	☐ Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	☐ Sanitary (Exists) Specify Type:	☐ (New) Sanitary Specify Type:	Municipal/City	What Type of Sewer/Sanitary System Is on the property?		Distance Structure is from Shoreline :	Distance Structure is from Shoreline:
Height: //	Height:				ntract)	<pre>sited (min 200 gallon)</pre>	:ify Type:	ify Type:		ype of tary System property?		□ Yes	ls Property in Floodplain Zone?
,					1			≱ Well	□ City	Water		□ Yes X No	Are Wetlands Present?

XIs Property/Land within 300 feet of River, Stream (Incl. Intermittent)
Creek or Landward side of Floodplain?

If yes—continue—

Distance Structure is from Shoreline :

Section

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, Township 45

__ N, Range _

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Lot Size

Acreage 490

Existing Structure: (If permit being applied for is relevant to it)
Proposed Construction:

Length: Length:

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The state of the s	Conditional Use: (explain)
	Special Use: (explain)
A CONTRACTOR OF THE CONTRACTOR	Accessory Building Addition/Alteration (specify)
A SAN AND AND AND AND AND AND AND AND AND A	Accessory Building (specify)
(13-scason room	Addition/Alteration (specify) 1) 1149,004 /3-
	Mobile Home (manufactured date)
r □ cooking & foo	Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)
	with Attached Garage
	with (2 nd) Deck
	with a Deck
	with (2 nd) Porch
The second secon	with a Porch
Walter Street St	with Loft
44	Residence (i.e. cabin, hunting shack, etc.)
	Principal Structure (first structure on property)
	Proposed Structure

Owner(s): Authorized Agent: FAILURE TO OBTAIN A PERMIT ON STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

Joing any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayrield County in determining whether to issue a permit. I (we) further accept liability which which information I (we) am (are) providing and that it will be relied upon by Bayrield County in determining whether to issue a permit. I (we) further accept liability which accuracy of all information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the n the Deed All Owners ع 2 sign or letter(s) of authorization must accompany this application) Date Date 0 1/2 Ŵ

to send permit $\overline{P,D}$

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View

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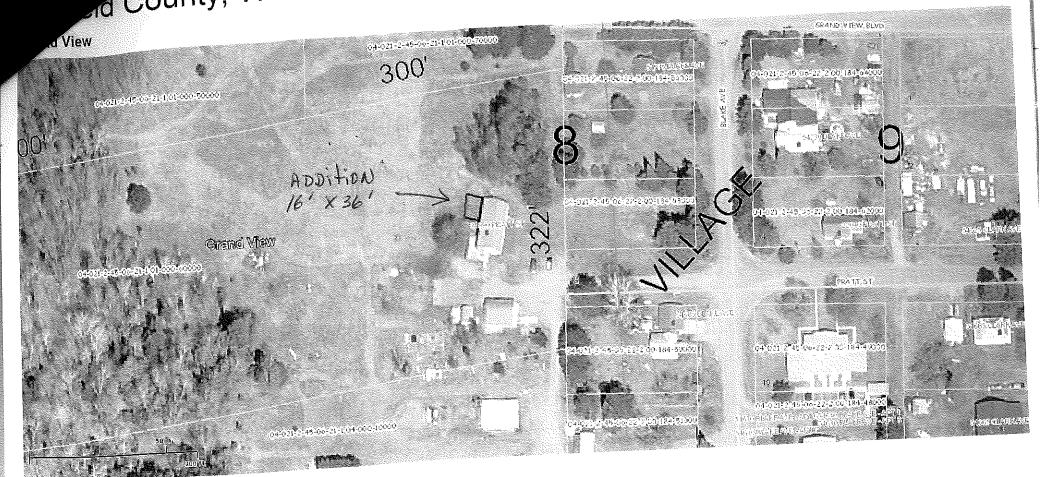
Copy of Tax Statement recently purchased the property send your Record

(If you are signing on behalf of the

owner(s) a letter

		Hold For Fees:		Hold For Affidavit:	was	Hold For TBA:	July.	
Approval:	Date of				1		tor: M H	Signature of Inspector:
-inspection:	Date of Re-Inspection:	ched.)	$I. \mathcal{H}\mathcal{U}\mathcal{U}\mathcal{U}$ (If \underline{No} they need to be attached.)	No N	Inspected by: Attached? Yes	onditions Att	Date of Inspection: $(6-13-13)$ Condition(s): Town, Committee or Board Conditions	Date of Inspection: Condition(s): Town,
rict $(\mathcal{R} - \mathcal{A})$ fication (3)	Zoning District () Lakes Classification (all setbacks	Inspection Record: Mutaall.
UM KNOWN □NO	⊠Yes □Yes	Were Property Lines Represented by Owner Was Property Surveyed	Were Property Line		0	AXYes □ No AXYes □ No	Was Parcel Legally Created Was Proposed Building Site Delineated	Was Vas Proposed B
	Case #		Previously Granted by Variance (B.O.A.) ☐ Yes SKNo				ce (B.O.A.) Case #:	Granted by Variance (B.O.A.) ☐ Yes XNo
uired ⊡Yes XINo ched ⊡Yes XINo	Affidavit Required Affidavit Attached	□ Yes ※No	Mitigation Required Mitigation Attached	No o	(Deed of Record) (Fused/Contiguous Lot(s))		Is Parcel a Sub-Standard Lot Yes Parcel in Common Ownership Yes Is Structure Non-Conforming Yes	Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming
			5	enial:	Reason for D Permit Date:			Permit #/ パラン
ite:	Sanitary Date:	# of bedrooms:		Number:	Sanitary Number:	only)	Issuance Information (County Use Only)	uance Infor
<u>T), Privy (P)</u> , and <u>Well</u> (W). egun. Welling Code.		Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), a NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	d Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holdir Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use Vew One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Ocal Town, Village, City, State or Federal agencies may also require permits.	r Construction ne (1) Year fror Dwelling: ALL , City, State or	on(s) of New nits Expire Or & Two Family Town, Village	and Use Perr F New One I	Stake or Mark Proposition (NOTICE: All L	(9)
ack must be measured must be visible from posed site of the structure, or must be	ck must be a	other previously surveyed corner or marked by a licensed surveyor at the owner's expense. Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setba one previously surveyed corner to the other previously surveyed corner at the owner's expense.	1 the minimum required setback	hirty (30) feet from Department by us	owner's expense eet but less than to be yether but less than to be yether or verifiable by the	d surveyor at the re than ten (10) furveyed corner, o	d corner or marked by a license r construction of a structure mo corner to the other previously s veyor at the owner's expense.	er previously survey r to the placement of previously surveyed ked by a licensed sur
previously surveyed corner to the	t be visible from one p	Feet red setback, the boundary line from which the setback must be measured must be visible from one	e boundary line from which the	⊊. - -		າin ten (10) feet ເ	Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure within ten (10) feet of the minimal	tback to Privy
204 Feet			Setback to Well	Feet Fa Feet			Setback to Septic Tank or Holding Tank Setback to Drain Field	tback to Seption
6004 Fee		1 1	Elevation of Floodplain		, S	R	East Lot Line Tolum	tback from the
Feet Feet		tland 6 Slope Area	Setback from Wetland Setback from 20% Slop	Feet	3 5 4		Setback from the West Lot Line Setback from the West Lot Line	tback from the
NA Feet		Setback from the Bank or Bluff	Setback from the			*	North 10+ Line	thack from the
WA Fee	ater mark)	Lake (ordinary high-wa	Setback from the	Feet	70%	Road	Setback from the Centerline of Platted Road	tback from the
Measurement		Description		Measurement	Measu		Description	
Changes in plans must be approved by the Planning & Zoning Dept.	pproved by the	nges in plans must be ap	Cha		uing) est point)	ior to contin	complete (1) (7) above (prior to continuing)(8) Setbacks: (measured to the closest point)	Please comple (8)
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AAL-SANIO								
			10%	(*) Wetlands; or (*) Slopes over 20%	lands; or (*)	(*) Wet	Show any (*):	(7)
P)	.d/or (*)	North (N) on Plot Plan (*) Driveway <u>and</u> (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake: (*) River: (*) Stream/Creek: or (*) Pond	ad (Name Frontage Ro pperty (*) Drain Field (DF); (* ek: or (*) Pond	an Frontage Ro es on your Pro tic Tank (ST);	North (N) on Plot Plan (*) Driveway and (*) F All Existing Structures (*) Well (W); (*) Septin (*) Lake; (*) River: (*)	(*) Driv All Exist (*) Well	Show Indicate: Show Location of (*): Show: Show: Show: Show any (*):	E (4)
				ion	Proposed Construction	Propose		

ad County, WI



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SUBMIT: COMPLETED APPLICATION, TAX

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

BAYFIALD ON FOR PERMIT
BAYFIALD ON THE PAID (Received)
ALIC 00 2012 AUG 09 2012

874g Permit #: Refund: Date: Amount Paid: #387.50 84874 SHS

vledge that I (we) ppt liability which we access to the	complete. I (we) acknow ermit. I (we) further acco county ordinances to h	TIES prrect and issue a pe hinistering	FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.	WITHOUT / e best of my l ipon by Bayfi I (we) consen	ITING CONSTRUCTION lined by me (us) and to the and that it will be relied u or with this application. I	TO OBTAIN A PERMIT on STAF rwing information) has been exan rmation I (we) am (are) providing ation I (we) am (are) providing in urpose of inspection.	FAILURE ing any accompa couracy of all inform g on this inform ple time for the p	application (includ r the detail and ac leid County relyin ty at any reasonal	I (we) declare that this am (are) responsible formay be a result of Bay above described proper
	x)	1	AND			explain)	Other: (explain)		
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			Marie Company of the		te)	Mobile Home (manufactured date)	Mobile		``
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www.widdhidiliidiliid	× ×	_				with (2 nd) Deck		- Control of the Cont	
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10000	x)				ure on property)	Principal Structure (first structure on property)	Principa		
Square	Dimensions	D		7	Proposed Structure			.	Proposed Use
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	Height:		Width:		Length:	(if permit being applied for is relevant to it)	ing applied f	(if permit be	Existing Structure:
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on) None	Privy (Pit) or Vaulted (min 200 gallon)	Vau				□ Basement	Relocate (existing bldg)	Relocate (ex	3
X VCII	Specify Type:	Speci	- 1	ــا د م د	* Year Kound		Addition/Alteration	Addition	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
□ City	fy Type:		□ (New) Sanitary			1-Story	struction	New Construction	
7			Military]					
Water	What Type of wer/Sanitary System is on the property?	What Type of er/Sanitary Sy on the propert	Se	# of bedrooms	Use	# of Stories and/or basement	ect applying for)	Project (What are you applying for)	Value at Time of Completion * include donated time &
					mindinaries in the second	A consist to the constant of t			Non-Shoreland
□ No	× No	feet			escontinue →	If yes			i.
X Yes	☐ Yes	е.	Structure is from Shorelin	Distanc	d or Flowage	☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage	v/Land with	☐ Is Propert	XShoreland →
Are Wetlands	Is Property in	feet	Structure is from Shorelin		am (ind. Intermittent)	E Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodollain? If yescontinue —	y/Land with	E is Propert	
5/36.04	w			VIEW	GRAND	N, Range (4 W	1 L	, Township	Section <u></u> ムン
	Acreage	Lot Size	Lot		Town of:	•		`	,
	7:	Subdivision:				Gov't Lot Lot(s) CSM		SW 1/4	SE 1/4,
Page(s) 3 2 1	2 S	Volume	3 04-000-10000	06-35-		catement, 04-	PLOII (USE	reggi Descii	LOCATION
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□ ¹	Attached	/	The start had	אים המא	ر ا ا ا	1	とうないかって		DAN ANTERSON
Written Authorization		/Zip):	ddress (include City/Sta	STOUC		8	lication on beha	Son Signing App	Authorized Agent: (Passon Signing Application on behalf of Owner(s))
Phone:	// Plumber Phone:	((5)	658HS	E H	Contractor Phone: P		T SAL Z		
ie:		ŀ	Ť		tate/Zip:				roperi
43-3151	4839 715-763-	Ŋ	GRAND VIEW WI	RLVO	22010 GRANDVIEW RLVD		מ עובש	GRAND	TOWN OF
OTHEN	Telephone:	300	City/State/Zip:	CONDI	Address:	□ SANI	M LAND USE	QUESIED-	Owner's Name:
An Indiana (Steel)	J S S S S S S S S S S S S S S S S S S S	2 S	CAL	W DO I FILE		VE BEEN ISSUED TO APPLICA	L PERMITS HA	TION OWIT A	OO NOT START CONSTRU
	- Landining			A CA	1	INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.	d until all rees unty Zoning Du	ts will be issue to: Bayfield Coi	NSTRUCTIONS: No permi
			Refund:	ETA DAN	Bayfield Co. Zoning Daw	· ·		<u>:</u>	- Turner Company and a line of the line of

Owner(s): ______(if there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application) DE are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Authorized Agent:

(If you

Address to send permit 7.0. Box

ABLE

Attach
Copy of Tax Statem
If you recently purchased the property send your Re

Date

-4-8

ū

Proposed Construction

North (N) on Plot Plan
(*) Driveway and (*) Frontage Road (Name Frontage Road)

All Existing Structures on your Property

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(*) Wetlands; or (*) Slopes over 20%

Show any (*):

See attached Site plan 4-17-13

Please complete (1) - (7) above (prior to continuing)

Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

	rtable, Composting) WH Feet	Feet	HIV.	Setback to Privy (Portable, Composting)
		Feet	17/1/4	Setback to Drain Field
IV K	Setback to Well	Feet	N N	Setback to Septic Tank or Holding Tank
			, A	
NH Feet	Elevation of Floodplain	Feet	306	Setback from the East Lot Line
/////////// Feet	Setback from 20% Slope Area	Feet	556	Setback from the West Lot Line
/\/\frac{1}{\frac{1}{2}} \text{Feat}	Setback from Wetland	Feet	40,	Setback from the South Lot Line Torna Kyl.
		Feet	ナロのシ	Setback from the North Lot Line
/ <i>V/H</i> Feet	Setback from the Bank or Bluff			4
207 Feet	Setback from the River, Stream, Creek	Feet	ひとい	Setback from the Established Right-of-Way
NH Feet	Setback from the Lake (ordinary high-water mark)	Feet	540	Setback from the Centerline of Platted Road
		0.00 d.a.		
Measurement	Description	it	Measurement	Description

Prior to the placement or construction of a structure within ten (10) feet of the minimum required se other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure; or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W)

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:		# of pedrooms:	odlitaly bate.	SIII Ove
Permit Denied (Date):	Reason for Denial:				
Permit#1,9-039	Permit Date: 6-14-13	27:1			
Is Parcel a Sub-Standard Lot	Jour Lot(s) X No	Mitigation Required Mitigation Attached	□ Yes Xwo	Affidavit Required XYes Affidavit Attached □Yes	Yes No
Granted by Variance (B.O.A.) Yes Xuo Case #:		Previously Granted by Variance (B.O.A.)		Case #:	
Was Parcel Legally Created XYes □ No Was Proposed Building Site Delineated XYes □ No	3	Were Property Lir	Were Property Lines Represented by Owner Was Property Surveyed	Wes	□ No
Inspection Record: Month all reservice ments				Zoning District (F-	(F-1)
Date of Inspection:	Inspected by:	tules		Date of Re-Inspection:	tion:
Condition(s): Town. Committee or Board Conditions Attached? "Yes "No-(it No they need to be attached.) Jel Middered and ZC meeting minutes	ached? Yes No-11	ng they need to be attached. ing minimites	tached.)		
Signature of Inspector McCharl Ju	ith			Date of Approval.	1941-13 1941-13
Hold For Sanitary: Hold For TBA:		Hold For Affidavit:	Hold For Fees: 🗆		